

**Coordinated Review Effort
School Data
SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR**

**1st Review: NSLP () SBP ()
Follow-Up: NSLP () SBP ()**

SFA:	Date of Review:										
School:											
Address:											
Name/Title of Person(s) Interviewed:											
Reviewer(s):											
1. Type of School: (check all that apply) <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Charter <input type="checkbox"/> Regular <input type="checkbox"/> Boarding <input type="checkbox"/> RCCI <input type="checkbox"/> Other _____ <input type="checkbox"/> Pricing _____ <input type="checkbox"/> Non Pricing <input type="checkbox"/> Closed Campus <input type="checkbox"/> Open Campus <input type="checkbox"/> Traditional Schedule # of Days per week () <input type="checkbox"/> Year Round Schedule <input type="checkbox"/> Single-Track <input type="checkbox"/> Multi-Track Number of Tracks () Provision 3 Base Year () Year 1 () 2 () 3 () 4 ()	2a. Type of meal service: (check all that apply) <input type="checkbox"/> On Site Preparation <input type="checkbox"/> Base/Central Kitchen <input type="checkbox"/> Pre-packaged Satellite <input type="checkbox"/> Bulk Satellite b. Program: (check all that apply) <input type="checkbox"/> NSLP <input type="checkbox"/> SBP <input type="checkbox"/> SMP <input type="checkbox"/> SSO <input type="checkbox"/> ASCP c. () Food Service Management Company () Vended Name: _____										
3. Grades Participating:	LUNCH	BREAKFAST N/A ()	COMMENTS								
BY Current YR											
4. Total Students with Access:											
BY Current YR											
5. Average Daily Attendance Factor: BY L <input type="checkbox"/> S <input type="checkbox"/> N <input type="checkbox"/> Current YR L <input type="checkbox"/> S <input type="checkbox"/> N <input type="checkbox"/>	() L () S () N	() L () S () N									
6. Review Period/ # of Serving Days-BY/Current YR:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; border-bottom: 1px solid black;">BY</td> <td style="width: 30%; border-bottom: 1px solid black;">#</td> </tr> <tr> <td style="border-bottom: 1px solid black;">CY</td> <td style="border-bottom: 1px solid black;">#</td> </tr> </table>	BY	#	CY	#	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; border-bottom: 1px solid black;">BY</td> <td style="width: 30%; border-bottom: 1px solid black;">#</td> </tr> <tr> <td style="border-bottom: 1px solid black;">CY</td> <td style="border-bottom: 1px solid black;">#</td> </tr> </table>	BY	#	CY	#	
BY	#										
CY	#										
BY	#										
CY	#										
7. Offer Vs. Serve:	() Y () N If yes, Number of Meal Components: _____	() Y () N If yes, Number of Meal Components: _____									
8. A La Carte Available:	() Y () N	() Y () N									
9. Serving Times:											
10. Meals Served In:	() Cafeteria () Classroom () Outdoors () Other (describe in comments)	() Cafeteria () Classroom () Outdoors () Other (describe in comments)									
11. Number of Points where Meal Counts are Taken:											

Day of Review:	LUNCH				BREAKFAST N/A ()			
12. Reviewer's Count of Eligible Students Based on the LEA's Determination: (BY & Current YR): Free (F) Reduced (R) Paid (P)	BY		Current YR		BY		Current YR	
	F _____		F _____		F _____		F _____	
	R _____		R _____		R _____		R _____	
	P _____		P _____		P _____		P _____	
13. School's Combined Counts for the Day of Review:			___ Reviewer's Counts for the Day of Review:			= Difference +/-		
LUNCH	BREAKFAST N/A ()		LUNCH	BREAKFAST N/A ()		LUNCH	BREAKFAST N/A ()	
F	F		—	—		=	=	
R	R		—	—		=	=	
P	P		—	—		=	=	
14a. School's Reported Meal Counts - Review Period BASE YEAR/ACTUAL COUNTS FOR CLAIM:			SFA Claim for this School for the Review Period: BASE YEAR/ACTUAL COUNTS FOR CLAIM:		___ Reviewer's Validation BASE YEAR/ACTUAL COUNTS FOR CLAIM		= Difference +/-	
	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()
F								
R								
P								
T								
14b. School's Reported Meal Counts - Review Period: CURRENT YEAR/ CALCULATED COUNTS FOR CLAIM			SFA Claim for this School for the Review Period: CURRENT YEAR/ CALCULATED COUNTS FOR CLAIM		___ Reviewer's Validation CURRENT YEAR/ CALCULATED COUNTS FOR CLAIM		= Difference +/- CURRENT YEAR/ CALCULATED COUNTS FOR CLAIM	
	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()	LUNCH	BREAKFAST N/A ()
F					—	—	=	=
R					—	—	=	=
P					—	—	=	=
T			—		=		=	
15. ADP Factor If Needed: Validated ÷ Serving Days ÷ Eligible Students			LUNCH			BREAKFAST (NA)		
			Free			Free		
			Reduced			Reduced		
			Paid			Paid		

	LUNCH		BREAKFAST N/A ()		COMMENTS
16. Day of Review # of Ineligible &/or Second Meals Counted:					
17. Meals Served with PS2 Errors*:					
	LUNCH		BREAKFAST N/A ()		COMMENTS
	Observed	Incomplete	Observed	Incomplete	
18. Day of Review					

****A PS2 error is defined as a meal missing required components and/or repeated violations of vegetable sub groups, milk types, and at the State agency's discretion, whole grain-rich products, food quantities, and dietary specifications (calories, saturated fat, sodium and *trans* fat).**

INSTRUCTIONS FOR PROVISION 3 S-1 SCHOOL DATA FORM

Designate check [✓] the type of administrative review being conducted: 1st review or follow-up, NSLP or SBP. Use two sets of forms, one for each program.

1. Indicate the type of school by checking [✓] as many categories as apply. Indicate the Base Year for Provision 3, check [✓] the current year cycle. To determine the year of the Provision, refer to Provision 2/3 Optional Form O-5, a worksheet designed to determine cycle years. The Provision 3 Base Year is outside the four-year cycle.
- 2a. Check [✓] all types of meal service which apply to this individual school for both breakfast and lunch meal service.
 - b. Check [✓] all Child Nutrition Programs that are offered at this school, i.e., National School Lunch Program (NSLP), School Breakfast Program (SBP), Special Milk Program (SMP), Seamless Summer Option (SSO), and/or Afterschool Snack Care Program (ASCP).
 - c. Check [✓] if meal service is provided by a food service management company or meals are vended and enter the name(s) of the company (ies).
3. Enter the grades from all schools which participate in the NSLP and SBP, as applicable, at this school for both the Base Year and the Current Year. For example, if kindergarten children attend the school but do not have access to NSLP or SBP, this grade must be excluded from the grades that participate in the NSLP or SBP, as applicable.
4. Enter the total number of students who have access to the NSLP and SBP, as applicable at this school. For example, if kindergarten children attend the school but do not have access to the NSLP and SBP, as applicable, these children must be excluded from the number of children that have access to the NSLP and SBP, as applicable. This figure should encompass the time period for the review period. If this number is not available, use the number which is most representative of the review period. Calculate the Percent Change in Enrolled Students with Access by subtracting the Base Year number from the Current Year number. Divide the result by the base Year number, carry to 4 decimal places, round to 3 decimal places and multiply by 100 to convert to a percentage. If the enrollment has increased from the Base Year to the Current Year, record the Percent Change as a positive (+) number. If the enrollment has decreased from the Base Year to the Current Year, record the Percent Change as a negative (-) number.
5. Enter the Average Daily Attendance (ADA) factor for both the Base Year and the Current Year for NSLP and SBP, as applicable and check [✓] the source of the ADA factor, Local (L), State (S) or National (N). The local factor may be an attendance factor supplied by the SFA or one developed by the reviewer using local data. The reviewer should use the factor which provides the most accurate reflection of the actual attendance for the review period for this school. The attendance factor must be in decimal form rounded to three places.
6. Enter the review period (month and year) and number of serving days in the review period for NSLP and SBP, as applicable.
7. Indicate whether the school implements Offer versus Serve for NSLP and SBP, as applicable. If YES, enter the number of required components for a reimbursable meal.
8. Indicate whether the school has a la carte service available for NSLP and SBP, as applicable.
9. Record the time(s) when the meal service for NSLP and SBP, as applicable begins and ends.
10. Indicate each location where meals are served for NSLP and SBP, as applicable. If OTHER, describe the location or setting in the comments section.
11. Enter the number of points where meal counts are taken for NSLP and SBP, as applicable.
12. Count the number of students eligible for free and reduced price meals, during the review period as the Local Education Agency (LEA) originally approved them, including all direct certification, homeless, migrant, runaway youth, foster care, Head Start and Even Start. Do not adjust the count to compensate for applications that the LEA approved incorrectly. (Refer to Instructions for Provision 3 S-2, 201a and CRE Guidance, Critical Areas). Determine the number of paid eligible students by subtracting the free and reduced eligible counts from the Total Number of Students with Access to the SBP/NSLP recorded in S-1, 4. These current year estimates will be used to complete 402 a and 404a on the Provision 3 S-4 and the General Areas of Review forms 702c and d enter the current year estimates in the Current Year column.
13. Enter the school's total counts and reviewer's total counts for the day of review. (Refer to Instructions for Provision 3 S-3, 302a.) Calculate and record the difference. Any differences identified will not result in fiscal action and should not be carried forward onto Provision 3 FA-1, Line 5.

INSTRUCTIONS FOR PROVISION 3 S-1 SCHOOL DATA FORM (continued)

- 14a. **BASE YEAR:** Enter the school's base year counts for the same month as the review period in the current year, the SFA's claim for the school, and the reviewer's validated counts for the review period. The reviewer must use the same approach (individual school monthly, individual school annualized, SFA-wide annualized, etc.) that was used to prepare the claim for reimbursement. (Refer to instructions for Provision 3 S-4a, 405a and 405b.) Column "difference " is shaded since fiscal action is not calculated for differences identified in the base year.
- b. **CURRENT YEAR:** Enter the school's Total meal counts for the Current year. Provision 3 S-6a overrides this section when certification and/or benefit issuance errors are identified, If no certification and/or benefit issuance errors are identified, complete as follows. Record the SFA's Claim for the School for the current year and the Reviewer's Validation. Multiply the Reviewer's Validated Base Year counts by category from 14 ties the Percent Change in Students with Access from Provision 3 S-1, 4. Enter the results in Provision 3 S-1,14b. Current Year, Reviewer Validation. Calculate and record the difference between the SFAs claim and changes in enrollment, apply that enrollment factor to determine the validated meal counts. In addition, it may be necessary to make adjustments to the Current Year Calculated Meal Counts for the Claim to accommodate changes in the number of serving days. Refer to CRE Guidance, Critical Areas Provision 3 Guidance for additional information.)
15. Calculate the Average Daily Participation (ADP) factor. Divide the Base Year Reviewer's Validated meal counts by category recorded in Provision 3 S-1, 14a, by the Base Year number of Serving Days recorded in Provision 3 S-1, 6. Divide this number by the Base Year Reviewer's Count of Eligible Students recorded in Provision 3S-1, 12. Round the participation factors obtained to three decimal places.
16. Record the number of meals served to ineligible and/or second meals counted on the day of the review. (Refer to Instructions for Provision S-3a, 301a.)
17. Record the total number of incomplete meals resulting from PS2 Errors being offered on the serving line. A *PS2 error is defined as a meal missing required components and/or repeated violations of vegetable sub groups, milk types, whole grain-rich products, food quantities, and dietary specifications (calories, saturated fat, sodium and trans fat)*. If the menu is missing one or more components, or contains *repeated violations* for vegetable subgroups or milk type, all meals served from that menu cannot be claimed and must be recorded in Provision 3 S-1, 17, Total Meals with PS2 ERRORS. If food runs out during the meal service, count the number of meals with PS2 errors as a result of inadequate menu planning and/or preparation and record in S-1, 17. (Refer to Instructions for Provision S-3b, 304c.)
18. Record the total number of meals observed. This should include the number of complete and incomplete meals. Separately record the number of incomplete meals resulting from students not taking the number of components as required. In this case, the student was given an opportunity to select a reimbursable meal, but elected not to take it, and the meal was recorded as reimbursable at the point of service. (Refer to Instructions for Provision S-3b, 305c.)

SCHOOL CRITICAL AREAS OF REVIEW
SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR

NSLP () SBP ()

SFA:	School:			
REVIEW AREAS	YES	NO	N/A	COMMENTS
Performance Standard 1 Eligibility Certification Applications and Direct Certification 201a. Review of applications from the base year included: ____ All applications; or ____ A statistically valid sample. b. Were all applications approved correctly for this school? c. Were all direct certification, homeless, migrant, runaway youth, foster care, Head Start and Even Start eligibles correctly certified for this school? If NO to b. or c., explain in Comments. Record errors on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.				
Benefit Issuance 202a. Did the review of 10% of the names on the base year benefit issuance document result in a 5% or greater error rate? b. If YES, additional review included: ____ All names on the benefit issuance document; or ____ A statistically valid sample of names on the benefit issuance document. Record errors on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.				____ Names on Benefit Issuance Document x 10% (.10) = ____ Names to Review. ____ Number of Names in Error ÷ ____ Number of Names Reviewed = ____ x 100 = ____ %.
Updating Eligibility 203. Were changes in eligibility status increased no later than 3 operating days and decreased no later than 10 operating days from the final decision? Record errors on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.				

INSTRUCTIONS FOR PROVISION 3 S-2

ELIGIBILITY CERTIFICATION

If this school is being reviewed during a non-base year, a review of applications and benefit issuance documents is required unless these materials were reviewed during the school's base year, or during a subsequent review. If Eligibility Certification (201), Benefit Issuance (202) and Updating Eligibility (203) were reviewed during the school's base year, check [✓] N/A for each question and go to Day of Review; Performance Standard 1-Counting and Claiming, Provision 3 S-3a.

If Eligibility Certification (201), Benefit Issuance (202) and Updating Eligibility (203) were not reviewed during the school's base year or during a subsequent review, follow procedures below using the applications, direct certification, homeless, migrant, runaway, foster, Head Start, Even Start and benefit issuance documents for the school's base year.

- 201a. Obtain all of the eligibility documentation (applications, direct certification, homeless, migrant, runaway youth, foster care, Head Start and Even Start) for those students who had access to the NSLP and SBP, as applicable, during the base year review period. Count the number of students approved for meal benefits for the base year review period as made by the Local Education Agency (LEA). If there is no date on the application, direct certification or other eligibility documentation, consider it a valid application for the review period. Record this information on Provision S-1, 12 Base Year. Indicate if all applications or a statistically valid sample are reviewed. If using a statistically valid sample, follow the instructions for statistical sampling procedures in the CRE Guidance, Statistical Sampling, and retain documentation.
- b. Review and evaluate eligibility determinations for completeness and accuracy. Indicate if the application approval process is implemented correctly. Answer YES, if all applications are approved correctly. If any errors are noted, answer NO and explain in the Comments section. Record all discrepancies on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.
- c. Indicate if the direct certification and other eligibility determinations are correct. If direct certification and other eligibility documentation do not contain the required information, record the students as miscategorized on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5. If any errors are noted, answer NO and explain in the Comments section. Check [✓] N/A if a review of eligibility documents was done prior to the CRE and is not being done at this time.
- 202a. Test the system of benefit issuance, from the base year records, e.g., tickets, rosters, tokens by comparing a minimum of every 10th name listed as approved for free or reduced price meal benefits shown on benefit issuance documentation to the eligibility determinations. If more than 10% of the names are reviewed, record the procedure used to select the names in the Comments section. Complete the chart in the Comments section to determine the error rate. Enter the number of free and reduced price students listed on the benefit issuance document and multiply by 10% (.10) to determine the number of names to review. Round to the nearest whole number. Enter the number of students listed incorrectly on the benefit issuance document and divide by the number of names reviewed. Carry to 4 places beyond the decimal, round to 3 places beyond the decimal and multiply by 100 (example: $.0875 = .088 = 8.8\%$) to determine the percent in error, i.e. the error rate.
- b. If 5% or more of the names are in error, indicate if the additional review included either all remaining names on benefit issuance documentation, or a statistically valid sample. If using a statistically valid sample, follow the instructions for statistical sampling procedures in the CRE Guidance, Statistical Sampling, and retain documentation. Record all discrepancies on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.
203. Determine if there were changes in eligibility as a result of verification or resubmitted applications during the review period. If changes were required and not made within the required timeframes, answer NO. If there were no changes, check [✓] N/A and indicate if the LEA has established procedures in place to update eligibility by the required timeframes. Record all discrepancies on the Certification and Benefit Issuance Error Worksheet, Provision 3 S-5.

COORDINATED REVIEW EFFORT

SCHOOL CRITICAL AREAS OF REVIEW
 SPECIAL ASSISTANCE PROVISION 3
 NON-BASE YEAR

NSLP () SBP ()

SFA:	School:			
REVIEW AREAS	YES	NO	N/A	COMMENTS
Day of Review Performance Standard 1 Counting and Claiming 301a. Does each type of food service line as observed on the day of review provide an accurate count by eligibility category at the point of service (or approved alternate)? b. If NO, describe the problem and indicate why the problem was: _____ Non systemic _____ Systemic *				
302a. Were the meal count totals by category correctly combined and recorded? b. If NO, describe the problem and indicate why the problem was: _____ Non systemic _____ Systemic *				
303a. Is fiscal action needed for problems identified in 301. and/or 302? b. If NO, describe reasons.				

* Response results in PS 1 Violation. Record NO on SFA-1, 4.

INSTRUCTIONS FOR PROVISION S-3a

DAY OF REVIEW

301a. The purpose of the total meal count in Provision 3 schools is to determine if there has been a significant reduction in reimbursable meals served from the Base Year to the Current Year. Observe and indicate whether an accurate count of reimbursable meals is taken at the point of service or an approved alternate. To answer YES, the system must be based on an actual count of students served and must consistently yield correct results. A NO answer is needed when an accurate count of meals by category is not observed. If second meals or meals served to ineligible were observed, answer NO and record in School Data, Provision 3 S-1, 16.

In residential child care institutions, the State agency may approve implementation of Provision 3 without the requirements to obtain daily meal counts of reimbursable meals at the point of service if the State agency determines that enrollment, participation and meal counts do not vary, and there is an approved mechanism in place to ensure that students will receive reimbursable meals.

b. If 301a is answered NO, investigate the problem to determine if the causes are non-systemic or systemic. Describe why the problem was non-systemic or systemic and the fiscal and corrective action recommended. When the reviewer is unable to identify the actual number of reimbursable meals incorrectly claimed, there must be corrective action by the SFA to obtain total reimbursable meals for each meal service. If corrective action is not taken, withholding of funds, change to normal counting and claiming, and possible eventual termination from the program are among the actions that may be taken by the State agency.

302a. Observe how the meal counts by category are obtained from each point of service and combined for the total meal count for the school. Record the School's Total Count for the Day of Review on Provision S-1, 13. Validate the meal count and record as the Reviewer's Counts for the Day of Review on School Data Provision 3 S-1, 13. Calculate the differences to determine if the procedures used by the school were accurate. If there were differences between the school's total counts and the reviewer's total counts, the question must be answered NO. Any differences identified will not result in fiscal action.

b. Investigate to determine if the causes are non-systemic or systemic. Describe why the problem was non-systemic or systemic and the corrective action recommended.

303a. Indicate if corrective action is needed based on the problems identified in questions 301 and 302. If there are no problems, answer NA. (For additional information, refer to the CRE Guidance, Critical Areas.)

b. If there are problems in questions 301 and/or 302 and corrective action is not necessary, explain why in the Comments section.

COORDINATED REVIEW EFFORT

**SCHOOL CRITICAL AREAS OF REVIEW
SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR**

NSLP () SBP ()

SFA:	School:			
REVIEW AREAS	YES	NO	N/A	COMMENTS
Performance Standard 2 Day of Review Menus <i>To answer the questions below, State agencies must use the FNS Certification Tool (or an FNS-approved certification tool) in conjunction with the FNS Validation Review Checklist (Table 1, or similar table), written menu (s), production records, weighted nutrient analysis, and other supporting documentation to determine compliance with the daily/weekly meal pattern requirements including portion sizes.</i>				
304a. Were all required meal components available to all students participating in NSLP/SBP (210.10 and 220.8)?				
b. If NO, explain.* c. Record the number of meals with PS2 Errors on School Data, Provision 3 S-1, 17 and School Worksheet for PS2 ERRORS*. Provision 3 S-7.				
305a. Did all observed meals claimed for reimbursement contain the required number of meal components?				
b. If NO, explain. c. Record number observed and incomplete on Provision 3 School Data, S-1, 18.				

PROVISION 3 S-3b

INSTRUCTIONS FOR PROVISION 3 S-3b

DAY OF REVIEW

Performance Standard 2 Day of Review Menus

To answer the questions in this section, State agencies must use the FNS Certification Tool (or an FNS-approved certification tool) in conjunction with the FNS Validation Review Checklist (Table 1, or similar table), written menu (s), production records, weighted nutrient analysis, and other supporting documentation to determine compliance with the daily/weekly meal pattern requirements including portion sizes.

***A PS2 error is defined as a meal missing required components and/or repeated violations of vegetable sub groups, milk types, and at the State agency's discretion, whole grain-rich products, food quantities, and dietary specifications (calories, saturated fat, sodium, and *trans* fat).**

- 304a. Prior to the meal service, evaluate if all required meal components (including vegetable subgroups, milk type, whole grains) are available and comply with the written menu, and/or other supporting documentation such as production records, standardized recipes, food labels, etc. The school should be advised and given the opportunity to add any missing meal component (s) before the meal is served. If the missing meal component (s) is added, answer YES but record the deficiency and technical assistance which was provided in the Comments section. The reviewer must observe that a sufficient number of /all meal components are available and comply with the written menu, and/or other supporting documentation throughout the meal service for each serving line. Indicate if all menu meal components are available. A NO answer is required if a meal component is not available.
- b. If the school did not have all the required meal components available on each service line, describe the problem in the Comments section.
- c. Determine the number of meals affected which are counted and reported incorrectly for reimbursement. Record the number of non-reimbursable meals on Provision 3 S-1, 17 and School Worksheet for PS2 ERRORS, Provision 3 S-7. (A PS2 error is defined as a meal missing required meal components, vegetable sub groups, milk types, whole grains, food quantities, and dietary specifications.) If only one menu is offered, all meals are affected. If two or more menus are offered, refer to the CRE Guidance, Critical Areas, for further information.
- 305a. Observe and indicate if all meals counted for reimbursement contain the required number of meal components. If the reviewer observes one or more incomplete meals counted as reimbursable, a NO answer is required. Record the total number of meals observed. This should include the number of complete and incomplete meals. Separately record the number of incomplete meals resulting from students not taking the required meal and number of meal components required. In this case, the student was given an opportunity to select a reimbursable meal, but elected not to take it, and the meal was recorded as reimbursable at the point of service.
- b. If the school counted meals where the students did not take all the required meal components as reimbursable meals, describe the problem in the Comments section.
- c. Record the total number of meals observed and the number of incomplete meals counted as reimbursable on S-1, 18. Incomplete meals recorded in 304c must not be included in 305c.

SFA:		School:		
REVIEW AREAS	YES	NO	N/A	COMMENTS
<p>Performance Standard 2 Day of Review Menus</p> <p><i>To answer the questions below, State agencies must use the FNS Certification Tool (or an FNS-approved certification tool) in conjunction with the FNS Validation Review Checklist (Table 1, or similar table), written menu (s), production records, weighted nutrient analysis, and other supporting documentation to determine compliance with the daily/weekly meal pattern requirements including portion sizes.</i></p> <p>306a. Do portion sizes appear to meet the minimum amounts as planned or required for the day of review?</p> <p>b. If NO, do meal documentation records for the review period indicate that required quantities of food were available?</p>				
<p>307. If a variety of food is offered within a reimbursable meal, are all choices available to students eligible for free or reduced price meals?</p> <p>308a. Was fluid milk available in at least two options throughout the serving period on all serving lines?</p> <p>b. Are only low-fat or fat free milk choices offered?</p> <p>c. If flavored milk is offered, is it fat-free?</p> <p>d. If fluid milk substitutes are offered for non-disabled students with medical or special dietary needs, do the choices meet nutritional requirements in 210.10(d)(3) milk?</p> <p>309. Is accurate information (i.e., signage) about choosing a reimbursable meal, including the required food items/meal components for a reimbursable meal under OVS, available at, or near, the beginning of each serving line?</p> <p>310. Is offer vs serve properly implemented?</p> <p>311 Review menus, production records, and other documentation to determine if menu changes / substitutions have been made and if the changes/substitutes were made, were these consistent with the meal pattern requirements.</p>				

INSTRUCTIONS FOR PROVISION 3 S-3b (continued)

MENUS

State agencies must use the FNS Certification Tool (or an FNS-approved certification tool) in conjunction with the FNS Validation Review Checklist, (Table 1 or similar table) written menu (s), production records, weighted nutrient analysis, and other supporting documentation should be reviewed to answer questions 307 through 311.

- 306a. Determine if the planned portion sizes for the day of review menu and observe all points of service to determine whether portion sizes served meet the planned quantities required.
 - b. If it appears that portion sizes do not meet the planned quantity requirements as served, review the school's documentation and procedures, such as production records and nutrient analysis records for the review period, to determine if it is a consistent practice.
- 307. Determine if a variety of foods is offered within a reimbursable meal and if all choices are available to children eligible for free or reduced price meals. Schools may establish different unit prices for each reimbursable meal offered provided that the benefits made available to children eligible for free or reduced price meals are not affected.
- 308a. Determine if at least two different options of fluid milk were available throughout the meal service on all serving lines. All milk must be fat-free or low-fat. Milk with higher fat content is not allowed. Fat-free fluid milk may be flavored or unflavored, and low-fat fluid milk must be unflavored. Low fat or fat-free lactose-free and reduced-lactose fluid milk may also be offered.)
 - b. Determine if only low-fat or fat free milk choices are offered.
 - c. Determine if all flavored milk options offered are fat-free.
 - d. Determine if fluid milk substitutes offered for non-disabled students with medical or special dietary needs meet 210.10(d)(3).
- 309a. Determine if accurate information (i.e., signage) about choosing a reimbursable meal, including the required food items/meal components for a reimbursable meal under OVS, is available at, or near, the beginning of each serving line.
- 310. If the school uses the offer versus serve provision, determine if it has been properly implemented.
- 311. Review menus, production records, and supporting documentation to determine if menu changes/substitutions have been made and if the change/substitutes were consistent with the meal pattern requirements.

COORDINATED REVIEW EFFORT

SCHOOL CRITICAL AREAS OF REVIEW
SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR

NSLP () SBP ()

SFA:		School:		
REVIEW AREAS	YES	NO	N/A	COMMENTS
Review Period Performance Standard 1 Counting and Claiming 401a. Are meal counts by category for the review period reasonable compared to meal counts for the day of review? b. If NO, obtain the school's explanation and record in the Comments section. c. Does this explanation describe an acceptable meal count system?				Day of Review Total _____ Review Period Lowest to Highest _____ to _____
402a. Were there any days when the total count exceeded the number of students who have access to the NSLP and SBP, as applicable? b. If YES, was an acceptable explanation available for each day?				
403a. Were Base Year applications, certification documents and meal counts by category retained by the LEA/SFA and available for review?? b. If NO, record the LEA/SFA's explanation as to why the records were not available in the Comments section.				
404a. Were there patterns in the meal counts which appear questionable? b. If YES, obtain the school's explanation and record in the Comments section. c. After consideration of this explanation, do the patterns indicate questionable meal count practices?				
405a. Was the claim properly completed using the base year counts and adjusted for enrollment? b. Was the current year claim adjusted for changes in the number of serving days if different from the base year? c. If NO to a or b, explain and indicate why the problem was: _____Nonsystemic _____Systemic *				
406a. Is fiscal action needed for problems identified in 401 through 405? b. If NO, describe reasons.				

* Response results in PS 1 Violation. Record NO on SFA-1, 4

INSTRUCTIONS FOR PROVISION 3 S-4a

REVIEW PERIOD

- 401a. Obtain a copy of the meal counts by category for each serving day of the review period and compare it to the day of review count. Record the school's meal counts by category for the day of review and for the lowest day and the highest day during the Review Period in the chart in the Comments section. This comparison should be made to the number of meals reported by the school, prior to any daily meal adjustments which may have been made by the SFA as a result of edit checks, etc. However, if the reviewer determined that a non-systemic error occurred in the school's day of review count, the validated counts on the day of review may be used. Evaluate the counts and indicate if unreasonable shifts occurred in the counts by category from the review month to the day of review. Optional Form O-4 can be used to record this information. Determine if accurate counts of reimbursable meals are being made.
- b. If unreasonable counts are identified, obtain the school's explanation and record in the Comments section.
- c. Determine and indicate if the explanation describes an acceptable meal count system.
- 402a. Determine and indicate if the school claimed total meals on any day of the current year review period than the number of students with access to the NSLP and SBP, as applicable from Provision 3 S-1, 4. This determination should be made using the number of meals reported by the school, prior to any daily meal adjustments which may have been made by the SFA as a result of edit checks, etc.
- b. If YES, determine if there was an acceptable explanation for each day the total meals claimed was greater than the number of students with access to NSLP and SBP, as applicable. Answer NA if there were no days where the total meal count exceeded the number of students with access. A NO response (*) results in a Performance Standard 1 violation for this school.
- 403a. Determine whether Base Year applications, (and other certification documentation for free and reduced price meals) and meal counts by category were retained by the LEA/SFA and are available for review. A NO response (*) results in a Performance Standard 1 violation for this school.
- b. If NO, obtain the LEA's/SFA's explanation and record in the Comments section.
- 404a. Examine the patterns of the reported counts of total meals for the current year review period and indicate if the counts are questionable for the population of students participating in the school's meal program.
- b. Obtain the schools explanation and record in the Comments section.
- c. Determine and indicate if the explanation indicates questionable meal practices.
- 405a. Determine if the counts reported on the claim were completed using the base year counts adjusted for enrollment changes. If YES, determine if the school calculated the enrollment adjustment factor correctly. If NO, determine the correct adjustment for the school and provide technical assistance. Record the validated enrollment adjustment factor in the Comments section. If participation has decreased significantly, determine if the school should return to regular counting and claiming procedures. Record the validated claim in S-1 14. Record the differences between the SFA claim and the Reviewer's validation in S-1 14.
- b. If the number of serving days in the current year review period is different from the number of serving days in the base year, determine if the claim has been adjusted to reflect the difference. Refer to Provision 3 Guidance for additional information. Record the school's reported total meal count in S-1 14, Current Year, Total. This total meal count is used to determine the maintenance of a level of meal service rather than for claims calculation purposes. Record the SFA's claim for the school in S-1 14, Current Year. Record the Reviewer's Validation in 14. To validate the SFA's claim, applying the percentage change in enrollment from S-1 4 to S-1 14, adjust for the number of serving days. If the Reviewer's Validation is different from the SFA's claim for this school, record the difference in S-1 14. Answer YES if the validated count matches the SFA's claim for this school. If the reviewer's validated total meal count (NSLP and SBP, as applicable) did not match the SFA's total claimed meal count, answer NO and describe the problem.
- c. Investigate to determine where the problem occurred and if the causes are nonsystemic or systemic. Describe why the problem was nonsystemic or systemic and the fiscal and corrective action recommended. A Systemic problem (*) results in a Performance Standard 1 violation for this school.
- 406a. If YES, to questions 401 through 404, describe the corrective action to be taken including the time period covered. If YES to 405a and/or 405b, describe the corrective **and** fiscal action not be taken, including the time period covered. When the reviewer is unable to Obtain adequate base year and subsequent year documentation to confirm the Provision 3 meal counts, recalculation is required. If a systemic problem is identified which results in fiscal action, obtain information from Claims for Reimbursement for all affected claiming periods. Record information from other claiming periods on Other Meal Claim Errors - Fiscal Action Required, Provision 3 S-8. Answer NA only when no problems were identified in 401 - 405.
- b. If there are problems in 401 - 405 and corrective and/or fiscal action is not necessary, explain why in the Comments section.

SFA:	School:			
REVIEW AREAS	YES	NO	N/A	Comments
Performance Standard 2 Review Period Menus 407a. Did menu records, weighted nutrient analysis and/or other supporting documentation for the review period indicate that all required items were offered including vegetable sub-groups, milk types, and 100% whole grain rich foods? b. If NO, explain and record on the School Worksheet for PS2 ERRORS, S-7.				
408. Are minimum weekly requirements met for each age/grade group: a. Meat/Meat alternate? b. Grains? - Are 100% of grains offered as whole grain-rich products? c. Fruit? - Are half or less of the fruits offered throughout the week in the form of juice? d. Total Vegetables/vegetable sub-groups - Dark green? - Red/orange? - Beans/peas? - Starchy? - Other? e. Are half or less of the vegetables offered throughout the week in the form of juice? 409. Do manufacturer's food labels, packaging, or bid specifications indicate zero grams of <i>transfat</i> per serving? 410. Does the weighted nutrient analysis, averaged over one school week, indicate the content of meals are in compliance for: - Calories? - Saturated Fat? - Sodium?				

INSTRUCTIONS FOR S-4b

REVIEW PERIOD

- 407a. Obtain a copy of the menu records, weighted nutrient analysis and/or other supporting documentation such as production records, standardized recipes, food labels, etc. for the review period to determine if all required / meal components were offered on each serving day of the review period.
- b. If a menu is missing required meal components, investigate to determine if the menu was used in other claiming periods and explain in the Comments section. Record the menu, missing meal components and other PS2 errors, and number of meals claimed for reimbursement that were affected for the review period on the School Worksheet for PS2 ERRORS, S-7. Record deficient menus and meal counts for other claiming periods on Other Meal Claim Errors - Fiscal Action Required, S-8. If the SFA uses a centralized menu, fiscal action and corrective action must be taken for all schools using the central menu, including those schools that were not reviewed.
- 408a-e. Review menus and determine if the minimum weekly requirements for each meal pattern component identified have been met for each week of the review period.
- 409. Review manufacturer's food labels, packaging, or bid specifications to determine compliance with zero grams of *trans* fat per serving?
- 410. Determine if the weighted nutrient analysis (averaged over one school week) indicates the content of meals are in compliance with calorie, saturated fat, and sodium requirements. Completion of one weighted nutrient analysis for each age/grade group of one selected school for both NSLP and SBP, as applicable, is required.

INSTRUCTIONS FOR PROVISION 3 S-5

CERTIFICATION AND BENEFIT ISSUANCE ERROR WORKSHEET

Enter the student's name and the eligibility determination made by the LEA or school. If an error is identified for any student who has withdrawn within or after the review period from this school, indicate original determination of free, reduced, or denied.

Enter the start date of the error. This may be the application approval date or the date the infraction first occurred. If the date is not known, enter a dash (-) in the space and note the date of the 31st operating day for this school in the space provided. If the student is receiving meal benefits based on direct certification, homeless, migrant, runaway youth, foster care, Head Start or Even Start, check [✓] the DIR CT column.

The reviewer should check [✓] the appropriate column to indicate the type of missing information.

CH HH NM: CHILD/HOUSEHOLD NAME CS #: SNAP, TANF OR FDPIR CASE NUMBER INC AMT FRQ SRC: INCOME AMOUNT/FREQUENCY/SOURCE
SS #: LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER AD SIG: ADULT SIGNATURE

The reviewer should check [✓] the appropriate column to indicate the type of miscategorization error.

F/R: The school/SFA approved the application as free, but the reviewer determines it should be reduced.

F/D: The school/SFA approved the application as free, but the reviewer determines it should be denied.

R/D: The school/SFA approved the application as reduced, but the reviewer determines it should be denied.

R/F: The school/SFA approved the application as reduced, but the reviewer determines it should be free.

D/F: The school/SFA denied the application, but the reviewer determines it should be free.

D/R: The school/SFA denied the application, but the reviewer determines it should be reduced.

Refer to Provision 3 S-6 instructions for procedures to establish the percent of error for schools reviewed in a non-base year setting and to calculate the error rate for determine a PS1 error. Use Provision 3 S-6a to calculate fiscal action.

Check [✓] the error identified for students issued benefits for a category other than the one for which they were approved.

RED REC FRE: A student approved for reduced meals, but received free meals.

FRE REC RED: A student approved for free meals, but received reduced.

INELIG REC FRE: A student was ineligible for benefits or no application was on file, but received free meals.

INELIG REC RED: A student was ineligible for benefits or no application was on file, but received reduced price meals.

ELIG NO BEN FRE: A student eligible for free meals, but received no benefits.

ELIG NO BEN RED: A student eligible for reduced meals, but received no benefits.

COORDINATED REVIEW EFFORT

PERFORMANCE STANDARD 1 - MEAL ERROR RATE DETERMINATION

NA ☐

SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR

☐ NSLP ☐ SBP

SFA:	School:
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Base Year Applications Reviewed: All <input type="checkbox"/> Sample <input type="checkbox"/>				
Reviewed in: Base Year <input type="checkbox"/> Current Year <input type="checkbox"/> Other <input type="checkbox"/>				
CHART A Current Year	Estimate		Actual	
	Free	Reduced	Free	Reduced
1. Total number of students with errors contributing to a PS 1 violation.	From S-5, 1	From S-5, 2		
2. Number of serving days in review period from S-1, 6.	X	X		
3. Maximum number of meals for students with errors contributing to a PS 1 violation.	=	=	From S-5, 3+4	From S-5, 5+6
4. Average daily participation factor from S-1, 15.	X	X	X	X
5. Number of meals incorrectly claimed. (Complete Provision 3 S-6a, chart C, Column 4 to arrive at numbers to enter on this line.)	=	=	=	=
6. Adjusted number of free <u>plus</u> reduced price meals incorrectly claimed.				
7. Total number of free <u>plus</u> reduced price meals validated for the review period from S-1, 14. Current Year, Reviewer's Validation.	÷		÷	
8. Percent of meals claimed incorrectly for this school.	X 100 =		X 100 =	

Provision 3 S-6

November 2015

INSTRUCTIONS FOR PROVISION 3 S-6, LINES 5-8

PERFORMANCE STANDARD 1 - MEAL ERROR RATE DETERMINATION

The Provision 3 S-6 is used to determine if the school exceeded the Performance 1 threshold for the current year review period. Complete Provision 3 S-6a chart B and Chart C to calculate information needed to complete this form.

For Base Year Applications reviewed, check [✓] if ALL or a Sample of applications was reviewed.

Check [✓] when the review of the base year applications was done; either during the Base Year, the Current Year, or some other time, i.e., sometime between the base year and the current year.

5. Enter the number of meals incorrectly claimed for free and reduced from Provision 3 6-a, chart C, Column (4), Free and Reduced, without regard for plus or minus signs.
6. Add the number of free meals and the number of reduced price meals, or each NSLP and SBP, as applicable. Record the sum of these numbers by NSLP and SBP, as applicable.
7. From S-1, 14 (Reviewer Validation) enter the total free plus reduced price meals for each NSLP and SBP, as applicable, as validated by the reviewer.
8. Divide the number of free plus reduced price meals incorrectly claimed (line 6) by the total number of free plus reduced price meals validated for the review period (line 7). Carry to 4 places beyond the decimal, round to 3 places beyond the decimal and multiply by 100. (example: $.0875 = .088 = 8.8\%$). Record the percent of meals claimed incorrectly for this school in S-6, 8 and on SFA-1, 4. Do not round 9.95 through 9.99 to 10.0.

SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR

SFA:	School:
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REVISED CLAIM FOR PROVISION 3 BASE YEAR REVIEW PERIOD

CHART B	(1) Original # Eligible as Determined by the LEA and Counted by the Reviewer S-1, 12 Base Year	(2) Verified By Reviewer	x (3) Serving Days S-1, 6 Base Year	x (4) Participation Factor S-1, 15 Base Year	= (5) Revised Monthly Meal Count Totals Base Year	÷ (6) Total Reviewer Validated Meals for Base Year Review Period S-1, 14a, Total	= (7) Claim Percentage for Review Period Based on Revised Claim
Free							
Reduced							
Paid							
Total							100%

Round column (5) to the nearest whole number. Multiply column (7) by 100 to convert to percent.

Paid was adjusted from _____ to _____ to make total meals equal to total original meals.

CURRENT YEAR REVIEW PERIOD – PERFORMANCE STANDARD 1 CALCULATION

CHART C	(1) Actual Review Period Claim from S-1, 14 b, Current Year, Column b	(2) Revised Claim From Chart B, Column (5) divided by Base Year Serving Days multiplied by Current Year Serving Days from S-1, 6	(3) Column (2) plus or minus the Percent Change in Students with Access from Base Year, S-1, 4	(4) Difference Column (1) minus Column (3) + or – (Enter Free and Reduced on S-6, Chart A, Line 5; disregard + or – indicator when recording on S-6)
Free				
Reduced				
Paid				
Total				

CURRENT YEAR – MEAL COUNT ADJUSTMENTS

CLAIM PERIOD: _____

CHART D	(1) Difference from Chart C, Column (4) + or –	(2) Base Year Claim Period Total	(3) Claiming % from Chart B, Column (7)	(4) Revised Claim Column (2) times Column (3)	(5) Column (4) divided by Base Year Serving Days multiplied by Current Claim Period Serving Days	(6) Column (5) plus or minus % Change in Students with Access from Base Year, S-1, 4	(7) Current Year Actual Claim	(8) Difference Column (7) minus Column (6) + or –	(9) Meal Count Adjustment s Column (1) plus Column (8) + or –
Free									
Reduced									
Paid									
Total			100%						

INSTRUCTIONS FOR PROVISION 3 S-6a

Designate [✓] NSLP or SBP, as applicable for each program reviewed. Use one set of forms for NSLP and one set of forms for SBP, as applicable.

If applications were not reviewed during the base year, review and ascertain proper category of approval. If errors are found during this application review, they must be listed on the S-5. However, fiscal action and Performance Standard 1 violations would be determined as described below. Due to the method of calculations, benefit issuance errors would not be a consideration if the review is conducted in a non-base year. The following charts are designed for use with SFAs using monthly claims on a school by school basis.

CHART B REVISED CLAIM FOR PROVISION 3 BASE YEAR REVIEW PERIOD

- (1) Determine for any month in the base year after the SFA has approved applications (preferably the month that corresponds to the current year review period) the total number of free, reduced price, and paid eligibles, both as determined by the SFA and as the reviewer determines after identifying any errors in categorization.
- (2) Enter the number of eligibles as determined or verified by the reviewer after identifying any errors in categorization. To determine the number eligible after review, adjust the Original # Eligible as Determined by the LEA and Counted by the Reviewer that was recorded in column (1) and adjust upward or downward for application errors identified on S-5. (Do not include Benefit Issuance Errors in the adjustment numbers before the adjustments are made).
- (3) Enter the number of serving days from Provision 3 S-1, 6, Base Year.
- (4) Enter the Base Year Participation Factor from Provision 3 S-1, 14, Base Year.
- (5) Calculate Revised Monthly Meal Count Totals for the Base Year by multiplying Column (2) times Column (3) times Column (4) rounding only once in Column (5). Make any adjustments in the paid category to make the total revised count equal the original total, if applicable. Fill in the blanks below the chart to document the change made to the paid category.
- (6) Enter Total Reviewer Validated meals for the Base Year for this school from Provision 3 S-1, 14.
- (7) Divide Column (5) by Column (6) and multiply by 100 to convert to a percent. Enter the resulting revised claiming percentage for each category in Column (7), making any adjustments in the Paid category to make the Total equal 100%.
The Column (7) Claim Percentage for Review Period Based on Revised Claim would be used only as provided in CHART D to revise the base year claims.

CHART C CURRENT YEAR REVIEW PERIOD – PERFORMANCE STANDARD 1 CALCULATION

- (1) Enter the SFA Claim for this School for the Review Period from Provision 3 S-1, 14.
- (2) Enter the Revised Claim from CHART B, Column (5) divided by Base Year Serving Days, multiplied by Current Year Serving Days, from Provision 3 S-1, 6.
- (3) Increase or decrease Column (2) by the percent change in students with access from the Base Year as calculated in Provision 3 S-1, 4.
- (4) Subtract Column (3) from Column (1). Enter Free, Reduced and Paid here and enter Free and Reduced meals in the appropriate columns on Provision 3, S-6, Chart A, Line 5. Disregard the + or – sign for this step. Rows 6, 7 and 8 on the Provision 3 S-6 can now be completed.

CHART D CURRENT YEAR – MEAL COUNT ADJUSTMENTS

CHART D would need to be completed for each claim period in the current year (if more than one claim period is involved outside the review period) before combining with the difference in CHART C, column (4). All Chart D calculations for periods prior to the review period will be used by the SFA to calculate subsequent years' claims for corresponding claim periods. The Chart D calculations for the review period and beyond would be used to calculate subsequent years' claims as well as to determine fiscal action. Additional copies of Chart D are located on form Provision 2 S-6a, continuation sheet. These copies should be used to make adjustments to other claim periods.

- (1) Enter the differences from Chart C, Column (4). Show as + or -.
- (2) Enter the base year total claim for the claim period in the base year that corresponds to the current claim period outside the review period.
- (3) Enter the claiming percentage from Chart B, Column (7).
- (4) Multiply Column (2) times Column (3).
- (5) Divide Column (4) by the Base Year Serving Days in S-1, 6, multiplied by the number of days in the claim period in question.
- (6) Increase or decrease Column (5) by the percent change in students with access to the NSLP from the Base Year as calculated in Provision 3, S-1, 4.
- (7) Enter the SFA's current year's claim for this school for the claim period in question.
- (8) Subtract Column (6) from Column (7). Show as + or -.
- (9) Enter Meal Count Adjustments by adding Column (1) and Column (8). Minus (-) indicates an underclaim; plus (+) indicates an overclaim. These net amounts (by category) are entered on FA-1, Line 1 only if this is the only claim period (outside the review period) in error. If more than one claim period (outside the review period) is involved, combine the totals from Chart D, Column (8) for each claim period, with the review period total from Chart C, Column (4) and enter these net amounts (by category) on FA-1, Line 1.

SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR

[] NSLP [] SBP

SFA:	School:
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CURRENT YEAR - FISCAL ACTION CALCULATIONS

CLAIM PERIOD:

CHART D	(1) Difference from Chart C, Column (4) + or -	(2) Base Year Claim Period Total	(3) Claiming % from Chart B, Column (7)	(4) Revised Claim Column (2) times Column (3)	(5) Column (4) divided by Base Year Serving Days multiplied by Current Claim Period Serving Days	(6) Column (5) plus or minus % Change in Students with Access from Base Year, S-1, 4	(7) Current Year Actual Claim	(8) Difference Column (7) minus Column (6) + or -	(9) Meal Count Adjustments Column (1) plus Column (8) + or -
Free									
Reduced									
Paid									
Total			100%						

CURRENT YEAR - FISCAL ACTION CALCULATIONS

CLAIM PERIOD:

CHART D	(1) Difference from Chart C, Column (4) + or -	(2) Base Year Claim Period Total	(3) Claiming % from Chart B, Column (7)	(4) Revised Claim Column (2) times Column (3)	(5) Column (4) divided by Base Year Serving Days multiplied by Current Claim Period Serving Days	(6) Column (5) plus or minus % Change in Students with Access from Base Year, S-1, 4	(7) Current Year Actual Claim	(8) Difference Column (7) minus Column (6) + or -	(9) Meal Count Adjustments Column (1) plus Column (8) + or -
Free									
Reduced									
Paid									
Total			100%						

CURRENT YEAR - FISCAL ACTION CALCULATIONS

CLAIM PERIOD:

CHART D	(1) Difference from Chart C, Column (4) + or -	(2) Base Year Claim Period Total	(3) Claiming % from Chart B, Column (7)	(4) Revised Claim Column (2) times Column (3)	(5) Column (4) divided by Base Year Serving Days multiplied by Current Claim Period Serving Days	(6) Column (5) plus or minus % Change in Students with Access from Base Year, S-1, 4	(7) Current Year Actual Claim	(8) Difference Column (7) minus Column (6) + or -	(9) Meal Count Adjustments Column (1) plus Column (8) + or -
Free									
Reduced									
Paid									
Total			100%						

**SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR
SCHOOL WORKSHEET FOR MEALS with PS2 ERRORS**

SFA:		School:			
Day of Review					NA []
		Number of Meals with PS2 ERRORS By Category			
1. Menu	2. Meals with PS2 Errors	3. Total	4. Free	5. Reduced	6. Paid

CURRENT YEAR Review Period						NA []
			Number of Meals with PS2 ERRORS By Category			
7. Date	8. Menu	9. Meals with PS2 Errors	10. Total	11. Free	12. Reduced	13. Paid
TOTAL						

INSTRUCTIONS FOR PROVISION 3S-7

SCHOOL WORKSHEET FOR MEALS with PS2 ERRORS

This worksheet should be used to record information for the day of review and/or review period if a menu is identified which contain PS2 errors. **A PS2 error is defined as a meal missing required components and/or repeated violations of vegetable sub groups, milk types, and at the State agency's discretion, whole grain-rich products, food quantities, and dietary specifications (calories, saturated fat, sodium, and trans fat).*

DAY OF REVIEW: If the menu(s) for the day of review contained all required meal components for the entire meal service and no problems were noted, check [☒] NA.

If a menu with PS2 errors was identified at the beginning of the meal service or all meal components were not available throughout the entire meal service, complete the following:

1. Record the menu which contained PS2 error (s).
2. Record the missing meal component or other PS2 error.
3. Determine the number of meals counted as reimbursable which contained PS2 errors. Record the total number of meals which were affected.
- 4, 5, 6. If available, record the number of meals with PS2 errors by category: free, reduced and paid. If the information is not available, use the FA-7 sheet to determine the number of free, reduced, and paid meals with PS2 errors observed on the day of review.

Record the total meals affected by the PS2 errors on the day of review on S-1, 17.

REVIEW PERIOD: If menus for the review period indicate that all required meal components (including vegetable sub groups, milk types, and whole-grain rich products) were available, check [☒] NA.

If one or more menus were identified which did not contain all of the required meal components (including vegetable subgroups, milk types, and whole grain-rich products), complete the following:

7. Enter the date of the menu with PS2 errors.
8. Record the menu with PSE errors.
9. Record the missing meal component (including vegetable sub groups, milk type, and whole grain-rich products).
10. Determine the total number of meals claimed as reimbursable which contained PS2 errors.
- 11,12,13. Use the FA-7 sheet to determine the number of free, reduced and paid with PS2 errors identified in the review period and record by category in Columns 11, 12, 13.

OTHER MEAL CLAIM ERRORS - FISCAL ACTION REQUIRED
SPECIAL ASSISTANCE PROVISION 3 NON-BASE YEAR

SFA:	School:
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			Number of Meals			
A.	B.	C.	D.		E.	F.
SFA or School	Claim Period	Describe Type of Error	SFA or School Data		— Reviewer's Data	= Difference + or -
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
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			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=
			F		—	=
			R		—	=
			P		—	=

INSTRUCTIONS FOR PROVISION 3 S-8

OTHER MEAL CLAIM ERRORS - FISCAL ACTION REQUIRED

All errors identified during the review must be corrected. Record all identified errors which occurred in other claim periods or review period errors, not previously recorded. These errors do not contribute to the PS 1 Violation threshold, but are subject to fiscal action.

1. Check [☒] NA if errors were not identified in other claim periods.
2. SFA, School - If the form is being used to record only SFA errors, enter NA for the school. If used to record school errors, enter school name.

COLUMN

- A. Identify where the error occurred. Enter SFA or S (school). For PS2 errors in schools that were not reviewed, record each school's meal counts separately or record the total for the SFA.
- B. Record the claim period affected by the error.
- C. Indicate the type of error, including date of error. Examples of the types of errors that must be recorded are listed in CRE Guidance, Critical Areas.
- D. Record the number of meals claimed for reimbursement by the SFA for the school. If the errors occurred at the SFA, enter the total number of meals claimed for reimbursement.
- E. Record the number of validated meal counts by category, when appropriate.
- F. Calculate the difference between column D and column E.